

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	PCT/EP2005/050101
	Filing Date	January 11, 2004
	First Named Inventor	Simon Goldberg
	Title	FLEXIBLE WALL HAVING FIRE RESISTANT PROPERTIES
	Art Unit	
	Examiner Name	
	Attorney Docket Number	020306-001600US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

20350

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Name	Registration Number

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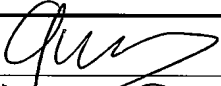
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature		Date	July 11 th 2006
Name	Simon GOLDBERG	Telephone	321/726.65.00
Title and Company	DIRECTOR - GOLDFIRE SRL		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.